

Support HB 133: A Year of Insurance After Pregnancy Would Promote Healthy Mothers & Babies

We support House Bill 133 by Rep. Toni Rose because it would promote health for mothers and babies during the critical first year of a child's life. Many medical issues and complications arise months after pregnancy. Pregnancy complications are a significant concern in Texas, leading to long-term health issues for mothers and babies, expensive hospital stays, and higher costs to Medicaid and the state. This bill would allow mothers to keep Medicaid coverage for 12 months after pregnancy rather than just 2 months. This step would implement the top recommendation of the state's Maternal Mortality & Morbidity Review Committee, improve access to medical and mental health care, address the costs of untreated postpartum depression in Texas, and support infants and toddlers during the critical early years of brain development, among other benefits.

Maternal deaths and pregnancy complications remain a significant concern in Texas, resulting in tragedy and long-term health issues for many mothers and children and higher financial costs for Medicaid and the health system.

- Texas' Maternal Mortality and Morbidity Review Committee found that nine out of ten pregnancy-related deaths were preventable, and one-third of maternal deaths occurred 43 days to one year after pregnancy.¹
- Maternal deaths are only the tip of the iceberg. Many more Texas mothers face severe complications in the year after pregnancy, such as postpartum depression, hemorrhage, infection, and cardiac event.
- Pregnancy complications can lead to extra hospital stays, extra medication or procedures, and long-term health effects for mother and baby during the early years of a child's development.²
- Maternal mental health conditions such as postpartum depression are one of the most common complications of pregnancy, affecting 1 in 7 Texas moms.³ Untreated postpartum depression harms a child's health, brain development, and school readiness. A recent report found that failing to treat maternal mental health conditions costs Texas \$2.2 billion for one year of births due to productivity losses, child and behavioral and developmental disorders, maternal health expenditures, and preterm births.⁴

¹ Maternal Mortality and Morbidity Task Force and Department of State Health Services Joint Biennial Report. (Dec.. 2020).

² See Earls, M. Clinical report—Incorporating recognition and management of perinatal and postpartum depression into pediatric practice. Pediatrics. 126(5), 1032-1039 (2010).

³ Texas Health and Human Services Commission. Rider 85 Report: Postpartum Depression Among Women Utilizing Texas Medicaid. (Feb. 2019) (citing Centers for Disease Control and Prevention, Pregnancy Risk Assessment Monitoring System (PRAMS) combined CY 2014-2016 data).

⁴ Mathematica. "Untreated Maternal Mental Health Conditions in Texas: Costs to Society and to Medicaid." (March 2020).

Access to health insurance is key for addressing these challenges, yet Texas is one of few states where Medicaid is typically not available to women with jobs below the poverty line, except during their pregnancy and 60 days after pregnancy.

- Medicaid is critical coverage for pregnant women, but in Texas, it cuts off 60 days after pregnancy. Many Texas moms then become uninsured because their jobs do not offer insurance, Texas is one of the states that generally does not make low-wage adults eligible for Medicaid insurance, and subsidies on [healthcare.gov](https://www.healthcare.gov) are only available for people above the poverty line.
- When Texas women become uninsured 60 days after pregnancy, they may only have access to the state's new Healthy Texas Women Plus (HTW Plus) program.
- HTW Plus is an important advancement for women's health and could be the backbone for a comprehensive benefit program through postpartum Medicaid. However, as opposed to the proposed 12-month Medicaid coverage, HTW Plus does not cover many important services, including a broad prescription drug benefit, surgical care, hospital inpatient or outpatient care, and physical therapies. Also, HTW Plus has virtually no network of specialty or mental health providers to deliver covered services right now.

Now is the time to act. The COVID-19 relief package signed by the President makes it easier for Texas to implement 12-month postpartum coverage legislation — once passed by the Legislature — without the long negotiation process with the federal government that was previously required.

- The American Rescue Plan Act includes a bipartisan provision giving states the option of extending postpartum coverage using a State Plan Amendment (SPA) instead of through a Section 1115 waiver. SPAs are a much faster way to secure federal Medicaid matching funds and less complex to implement.
- During the Public Health Emergency (PHE), Texas is temporarily allowing mothers to keep Medicaid beyond the state's typical two-month cut-off, but if the Legislature does not act this session, once the PHE is over the state will resume the practice of ending Medicaid coverage for moms two months after childbirth.

House Bill 133 would implement the top recommendation of Texas' Maternal Mortality & Morbidity Review Committee and promote health for mothers and babies during the critical first year of a baby's life.

- Research shows that access to Medicaid coverage for postpartum moms increases the use of postpartum outpatient care, particularly for women who have had pregnancy complications.

- Extending coverage for one year after pregnancy for already-eligible women will improve access to primary, specialty, and mental health care so moms can address issues before they become life-threatening.